

COMMONWEALTH OF PENNSYLVANIA
CAMPAIGN FINANCE STATEMENT

File this in lieu of a full report *only if* aggregate receipts, expenditures, or liabilities incurred each did not exceed \$250.00 during the reporting period.

FILER IDENTIFICATION NUMBER		REPORT FILED ON BEHALF OF		CANDIDATE <input checked="" type="checkbox"/>	COMMITTEE <input type="checkbox"/>	LOBBYIST <input type="checkbox"/>
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <i>CASIMIR J KWITOWSKI</i>						
STREET ADDRESS <i>4015 STANLEY AVE</i>						
CITY <i>ERIE</i>		STATE <i>PA</i>		ZIP CODE <i>16504-2405</i>		
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE <i>CITY COUNCIL-ERIE PA</i>	DISTRICT NO.	PARTY	DATE OF ELECTION		
				MO.	DAY	YEAR
6TH TUESDAY PRE-PRIMARY	1.			<i>11</i>	<i>7</i>	<i>2017</i>
2ND FRIDAY PRE-PRIMARY	2.					
30 DAY POST-PRIMARY	3.					
6TH TUESDAY PRE-ELECTION	4.					
2ND FRIDAY PRE-ELECTION	5.					
30 DAY POST-ELECTION	6. <input checked="" type="checkbox"/>					
ANNUAL REPORT	7.					

DATES OF REPORTING PERIOD	MO.	DAY	YEAR	TO	MO.	DAY	YEAR
	<i>10</i>	<i>24</i>	<i>17</i>		<i>11</i>	<i>27</i>	<i>17</i>

CASH BALANCE AT END OF REPORTING PERIOD:	\$ <i>(195.05)</i>
TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:	\$ <i>195.05</i>

AMENDMENT REPORT?	YES		NO	<input checked="" type="checkbox"/>
TERMINATION REPORT?	YES		NO	<input checked="" type="checkbox"/>

FOR OFFICE USE ONLY	
2017 DEC -7 PM 2:08 ERIE COUNTY VOTER REGISTRATION <i>DH</i>	

AFFIDAVIT SECTION

PART I-

If statement is filed on behalf of a Political Committee or Candidates's Committee, the Treasurer must sign here.
 If statement is filed on behalf of a Candidate, the Candidate must sign here.
 If statement is filed on behalf of a Contributing Lobbyist, the Lobbyist must sign here.

I SWEAR (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIABILITIES INCURRED DURING THE REPORTING PERIOD INDICATED ABOVE DID NOT EXCEED TWO HUNDRED AND FIFTY DOLLARS (\$250.00) AND THIS REPORT IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.

SWORN TO AND SUBSCRIBED BEFORE ME THIS

7th DAY OF *December* 20*17*

COMMONWEALTH OF PENNSYLVANIA

NOTARIAL SEAL

LAURIE A. WATSON
Notary Public

CITY OF ERIE, ERIE COUNTY

My Commission Expires Feb 2, 2019

SIGNATURE

2-2-19
MO. DAY YR.

SIGNATURE OF PERSON SUBMITTING REPORT

CASIMIR J. KWITOWSKI
PRINTED NAME

814
AREA CODE

825-7601
DAYTIME TELEPHONE NUMBER

If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must sign here.

I SWEAR (OR AFFIRM) THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THIS POLITICAL COMMITTEE HAS NOT VIOLATED ANY PROVISIONS OF THE ACT OF JUNE 3, 1937 (P.L. 1333, No. 320) AS AMENDED.

SWORN TO AND SUBSCRIBED BEFORE ME THIS

____ DAY OF _____ 20____

SIGNATURE

MY COMMISSION EXPIRES _____
MO. DAY YR.

SIGNATURE OF CANDIDATE

PRINTED NAME

AREA CODE

DAYTIME TELEPHONE NUMBER